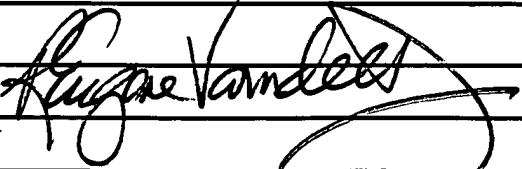


O P A S
APR 29 2010
TRANSMITTAL FORM
U.S. PATENT & TRADEMARK OFFICE
used for all correspondence after initial filing

Total Number of Pages in This Submission	Attorney Docket Number	VX062753 PCT																																				
ENCLOSURES (Check all that apply) <table border="1"> <tr> <td><input checked="" type="checkbox"/> Fee Transmittal Form</td> <td><input type="checkbox"/> Drawing(s)</td> <td><input type="checkbox"/> After Allowance Communication to TC</td> </tr> <tr> <td><input checked="" type="checkbox"/> Fee Attached</td> <td><input type="checkbox"/> Licensing-related Papers</td> <td><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences</td> </tr> <tr> <td><input type="checkbox"/> Amendment/Reply</td> <td><input type="checkbox"/> Petition</td> <td><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)</td> </tr> <tr> <td><input type="checkbox"/> After Final</td> <td><input type="checkbox"/> Petition to Convert to a Provisional Application</td> <td><input type="checkbox"/> Proprietary Information</td> </tr> <tr> <td><input type="checkbox"/> Affidavits/declaration(s)</td> <td><input type="checkbox"/> Power of Attorney, Revocation</td> <td><input type="checkbox"/> Status Letter</td> </tr> <tr> <td><input checked="" type="checkbox"/> Extension of Time Request</td> <td><input type="checkbox"/> Change of Correspondence Address</td> <td><input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below): <ul style="list-style-type: none"> - Request for Continued Examination Transmittal - Clarification of Advisory Action Request </td> </tr> <tr> <td><input type="checkbox"/> Express Abandonment Request</td> <td><input type="checkbox"/> Terminal Disclaimer</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Information Disclosure Statement</td> <td><input type="checkbox"/> Request for Refund</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Certified Copy of Priority Document(s)</td> <td><input type="checkbox"/> CD, Number of CD(s) _____</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Reply to Missing Parts/ Incomplete Application</td> <td><input type="checkbox"/> Landscape Table on CD</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53</td> <td></td> <td></td> </tr> <tr> <td colspan="3">Remarks</td> </tr> </table>			<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC	<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences	<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)	<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information	<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter	<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below): <ul style="list-style-type: none"> - Request for Continued Examination Transmittal - Clarification of Advisory Action Request 	<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer		<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund		<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____		<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD		<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53			Remarks		
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Remarks																																						

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Posz Law Group, PLC		
Signature			
Printed name	R. Eugene Varndell, Jr.		
Date	April 29, 2010	Reg. No.	29,728

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name		Date	

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



POSZ/SB/17-PLG (10-07)

Approved for use through 06/30/2010, OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/8/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2009

 Applicant Claims small entity status. See 37 CFR 1.27
Complete if Known

Application Number	10/591,326
Filing Date	08/31/2006
First Named Inventor	NISHIURA
Examiner Name	FANG, Shane

TOTAL AMOUNT OF PAYMENT	(\$ 940)
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Art Unit	1796
Attorney Docket No.	VX062753 PCT

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: **50-1147** Deposit Account Name: **Posz Law Group, PLC**

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charges fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s)
under 37 CFR 1.16 and 1.17 Credit any overpayments

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	
Utility	330	165	540	270	220	110	\$
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	

2. EXCESS CLAIM FEESFee Description

Each claim over 20 (including Reissues)

Small Entity**Fee (\$)** **Fee (\$)**

52 26

Each independent claim over 3 (including Reissues)

220 110

Multiple dependent claims

390 195

Total ClaimsExtra ClaimsFee (\$)Fee Paid (\$)- 20 or HP = x \$ = \$Multiple Dependent ClaimsFee (\$)Fee Paid (\$)

\$ \$

HP = highest number of total claims paid for, if greater than 20

Indep. ClaimsExtra ClaimsFee (\$)Fee Paid (\$)- 3 or HP = x \$ = \$

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	/ 50 =	(round up to a whole number) x	=	\$

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: <u>Request for Continued Examination Official Fee and Petition for One Month Extension of Time Official Fee</u>	\$810
	\$130

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	29,728	Telephone	(703) 707-9110
Name (Print/Type)	R. EUGENE VARNDELL, JR.	Date	April 29, 2010		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO:
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